



WISCONSIN

DEPARTMENT OF WORKFORCE DEVELOPMENT

Division of Economic Support

Bureau of Work Support Programs

**TO: Economic Support Supervisors
Economic Support Lead Workers
Training Staff
Child Care Coordinators
W-2 Agencies**

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Non W-2 ☒ **W-2** ☐ **CC** ☐

PRIORITY: High

SUBJECT: SPECIAL EXEMPT INCOME & COMMUNITY WAIVERS GROUP "B"

CROSS REFERENCE: MA Handbook

EFFECTIVE DATE: Immediately

PURPOSE

This memo provides instructions for determining Medicaid (Medical Assistance, MA) eligibility and entering CARES data for individuals participating in a Medicaid Home and Community Based Waiver (HCB Waiver). It is primarily intended for those Economic Support (ES) agencies that have clients requesting to participate in any Waiver program. CARES procedures described later in this memo will be in effect until CARES changes can be made to automate this additional deduction under "Group B" waiver eligibility.

BACKGROUND

DHFS, Division of Supportive Living-(DSL), Bureau of Aging & Long Term Care Resources (BALTCR), is responding to considerable requests to implement this change. The request involves an additional deduction for Group B participants. This deduction was allowable following the approval of a Medicaid State Plan amendment on October 1, 1991, but was not implemented. The Waiver Renewal submitted on October 1, 1999 recognized this additional deduction. The Renewal was verbally approved on January 3, 2000.

MA ELIGIBILITY

MA HCB Waiver applicants categorically qualifying for MA under a special income limit (Group B) are allowed an income deduction for “special exempt income” as defined in the Special Exempt Income Unit of the MA Handbook.

That unit includes as “special exempt income”:

- Income used for supporting others
- Court-ordered attorney fees
- Court-ordered guardian & guardian *ad litem* fees
- Expenses associated with establishing and maintaining a guardianship
- Expenses associated with a Self-Support Plan and Blind Work Expenses.

CARES

CARES does not include this deduction. Therefore, combine the amount of the special exempt income with “Medical/Remedial” expenses on screen ANCW (and appears on line 7 of screen ECSC).

Please document that you have included these expenses with Medical/Remedial expenses on ANCW and the amount on the CARES Comment Screen (CMCC).

CONTACT

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Note: Email contacts are preferred. Thank you.